KENTUCKY MEDICAID

School Based Health Services

<u>PROVIDER   BULLETIN PROPRIETARY BILLING</u>

March 17, 2004

The purpose of this bulletin is to clarify the instructions for billing modifiers, the employee ID and number of students billed on School Based Health Services claims with dates of service prior to 10/16/03 and dates of service 10/15/03 and after when submitting electronically in the legacy/proprietary format.

If you have any question on what format you are currently submitting, please contact the EDI Help Desk. If you are submitting proprietary files to KY Medicaid, your submitter ID begins with **AP**.

<u>Electronic Billing Clarifications:</u>

<u>For claims with dates of service prior to 10/16/03</u> continue using local procedure codes, the 5 digit local modifiers that consist of a 2-digit discipline code, the 3-digit employee identifier and number of students. If you are currently using the **legacy/proprietary** format bill as follows:
Local Modifier(s)
  CMHC-MOD-NDC MODIFIER (field 19 of Record 2) – bill the 5 digit local modifier
Number of Students
  TYPE OF SERVICE (field 6 of Record 2) – bill the 1 byte number of students

<u>For claims with dates of service 10/16/03 and after</u>, use the standard modifiers listed in the KY Medicaid Billing Instructions.

The correct placement for billing modifiers, employee ID and number of students using the **legacy/proprietary** format is:
First Modifier:
  Modifier (field 8 of record type 2) – bill the professional component modifier
Second Modifier
  CMHC-MOD-NDC MODIFIER (field 19 of Record Type 2) – bill the employee ID and any
  designated second modifier(s) if applicable. Right justified
Number of Students
  TYPE OF SERVICE (field 6 of Record 2) – bill the 1 byte number of students

Note: When modifiers are applicable, enter the modifier(s) to the left of the employee ID and right justify data entered in the CMHC-MOD-NDC field.

DMS will discontinue acceptance of the legacy/proprietary electronic format at some point in the future. DMS strongly encourages you to contact the Unisys EDI Help Desk at (800) 205-4696 to test the HIPAA compliant 837 claims submission electronic format as soon as possible.   Once you have tested successfully with Unisys, you may begin submitting claims via the HIPAA compliant standardized 837 format.

Should you have any questions regarding the information contained in the billing instructions, please contact Unisys Provider Relations at (800) 807-1232. Any questions regarding the electronic format, please contact the EDI Help Desk at (800) 205-4696.